

CALIFORNIA AIR RESOURCES BOARD
MONTHLY QUALITY MAINTENANCE CHECK SHEET
XONTECH 910A TOXICS SAMPLER

Location: _____ Month/Year _____
 Station Number: _____ Technician: _____
 Property Number: _____ Agency: _____

| Sample Date | Can. ID Number | Elapsed Time | Start Vacuum | | Sampler Flow | | End Pressure | | Back Pressure |
|-------------|----------------|--------------|--------------|---------|--------------|-------------|--------------|---------|---------------|
| | | | Canister | Sampler | Meter | Pot set pt. | Canister | Sampler | |
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OPERATOR INSTRUCTIONS:

- Each Run: Check and record sampling information.
- Monthly: Perform system leak check. Date: _____;
- Interval as required: Return sampler to instrument shop for cleaning.
Date last cleaning: _____;
- Semi-Annual: Calibrate mass flow meter. Date last calibrated: _____;
Duo-dial set point: _____ Slope = _____ Intercept = _____;

| Date | Comments or Maintenance Performed: |
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Reviewed by: _____ Date: _____